

**2023
HOUSINGIOWA
CONFERENCE**

Permanent Supportive Housing in Iowa

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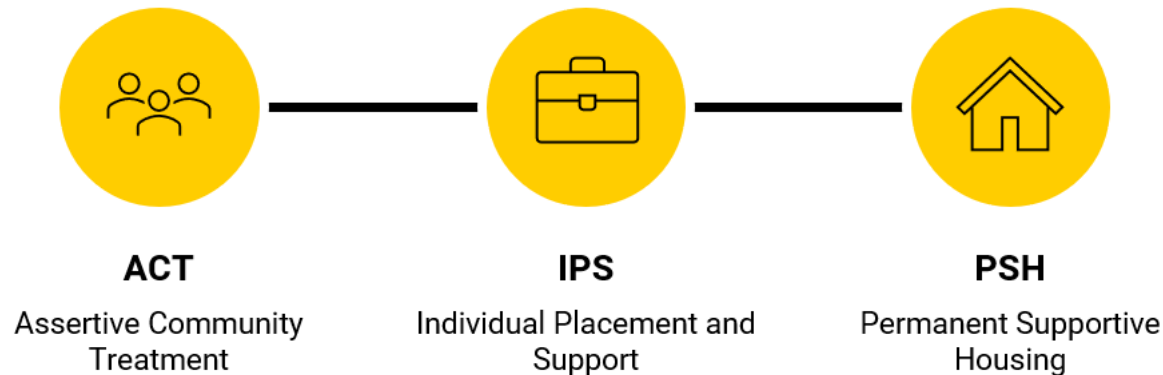
HousingIowa Conference 2023

Iowa's Center of Excellence for Behavioral Health

Promoting the use of centralized standards and best practices to advance behavioral health services

Iowa's Center of Excellence for Behavioral Health

Provide training, technical assistance, and fidelity monitoring for entities responsible for developing and implementing evidence-based practices for individuals with serious mental illness, serious emotional disturbance, and co-occurring conditions in Iowa.



Environmental Scan

- Conduct baseline environmental scan of EBPs for:
 - Adults with serious mental illness
 - Children with serious emotional disturbance, and
 - Individuals with co-occurring conditions in Iowa
- Provide recommendations to HHS for aligning EBPs with current best practices, workforce capacity, and the needs of Iowa's behavioral health system.
- Comprehensive list of community-based EBPs being provided throughout the state

Environmental Scan– Key Takeaways

- Training:
 - Varying levels of training being provided, requested; all entities are completing staff training/onboarding
 - Barriers include staff time, turnover, and financing, awareness of trainings
- Fidelity Monitoring:
 - Varying levels of engagement with and completion of reviews
 - Barriers include time to complete reviews lack of understanding the fidelity review process

PSH Statewide Advisory Committee

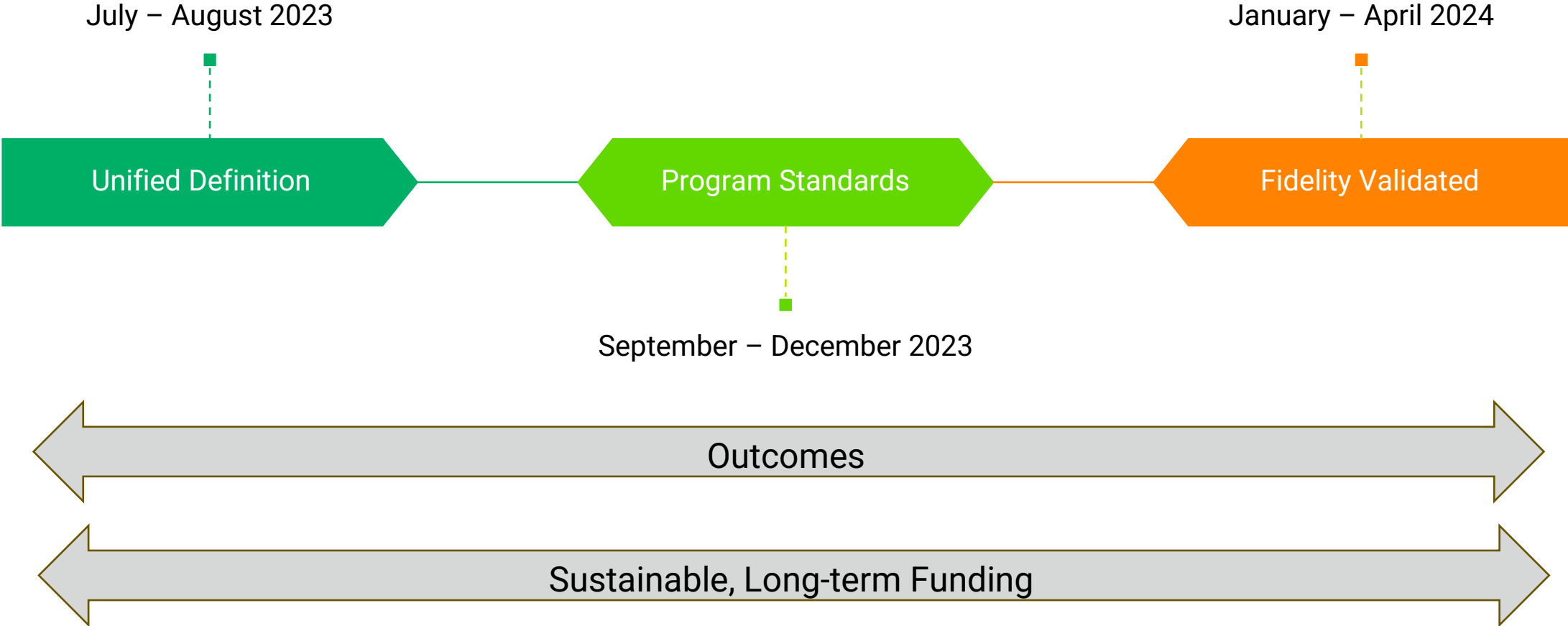
Who We Are

The Permanent Supportive Housing Statewide Advisory Committee consists of representatives from organizations providing, supporting, and financing permanent supportive housing.

What We Do

The Permanent Supportive Housing Statewide Advisory Committee provides guidance on the development and progress of the Center of Excellence for Behavioral Health to advance evidence-based practices in Iowa.

Creating Standardized PSH Statewide



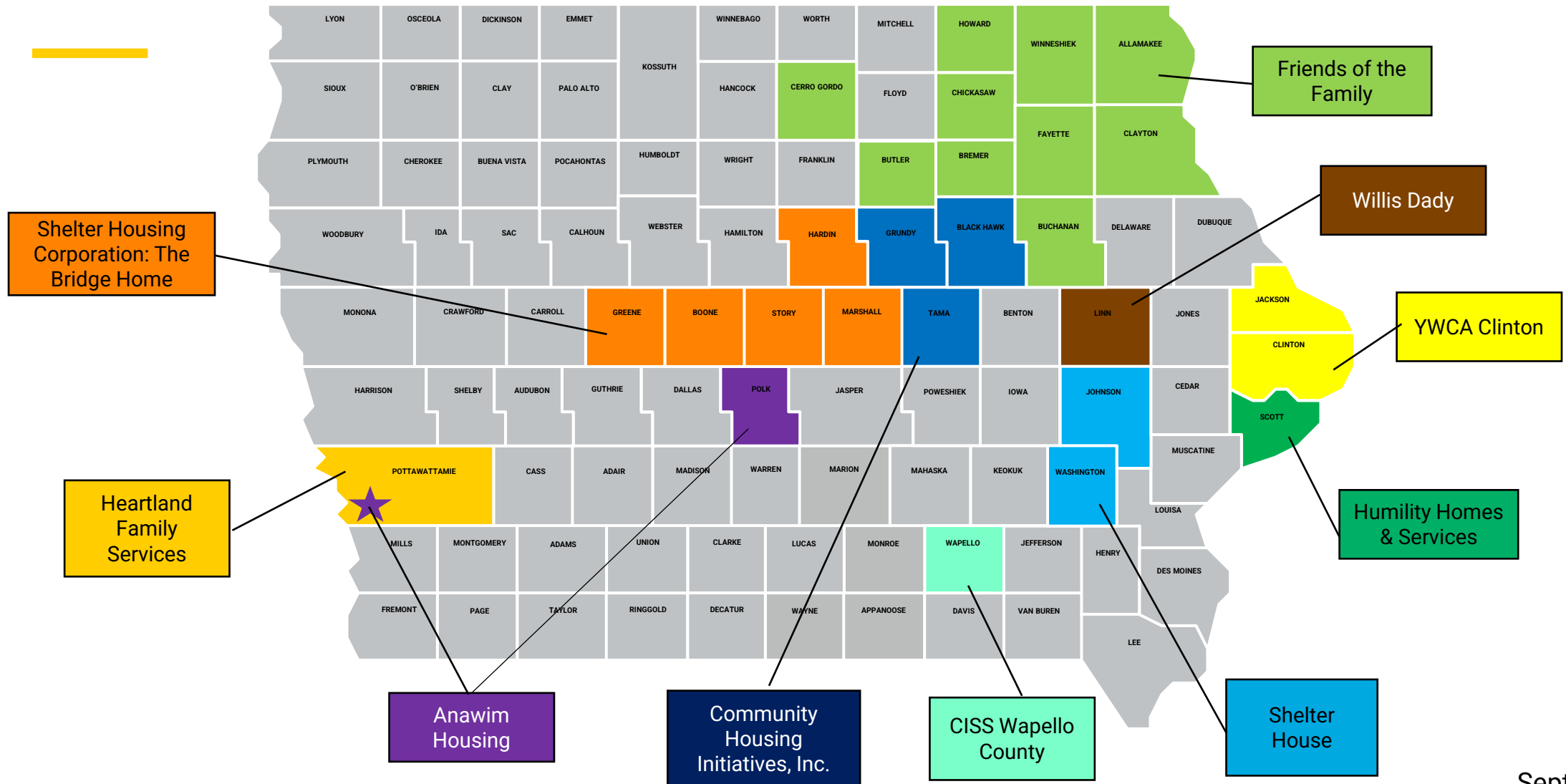
Current PSH Definition in Iowa

- Iowa Administrative Code 441–25.1
 - “voluntary, flexible supports to help individuals with psychiatric disabilities choose, get, and keep housing that is decent, safe, affordable, and integrated into the community. Tenants have access to an array of services that help them keep their housing, such as case management, assistance with daily activities, conflict resolution, and crisis response consistent with evidence-based practice standards published by the Substance Abuse and Mental Health Services Administration (SAMHSA)”

New Proposed Definition of PSH

“Permanent Supportive Housing (PSH) is an evidence-based, minimal barrier housing intervention prioritized for individuals with complex, multi-occurring conditions that meets fidelity to established standards [insert code reference if/when applicable]. Individuals in PSH programs live with affordability, autonomy, and dignity through the combination of person-centered, flexible, voluntary support services and a legal right to remain in their housing for as long as they wish, as defined by the terms of a renewable lease agreement. Access to and maintenance of housing is available to individuals who meet permanent supportive housing eligibility criteria and is not based on sobriety, behavioral, or program compliance.”

PSH Programs in Iowa



September 2023

EBP Analysis

- Information gathered from and consulted with:
 - Washington State Institute for Public Policy (WSIPP)
 - SAMHSA EBP Resource Center
 - The California Evidence-based Clearinghouse for Child Welfare (CEBC)

Multi-Systemic Therapy (MST)

Multisystemic Therapy (MST) is an intensive family and community-based treatment for serious juvenile offenders with possible substance abuse issues and their families. The primary goals of MST are to decrease youth criminal behavior and out-of-home placements.¹

Program Details

Target population

- 12- to 17-year-old youth
 - Substance use
 - Risk of displacement from home (i.e., antisocial or delinquent behaviors, and/or involved with the juvenile justice system)¹

Timeframe

- 3-5 months^{1,2}
 - Frequency: once/week to daily

Core Intervention Principles

- Tailored treatment efforts (e.g., frequency, treatment type) after "finding the fit" (i.e., understanding the child's behavior in the context of many systems of influence)^{1,2}
- Additional principles include positive and strength focused; present-focused, action-oriented, & well-defined; targeting sequences; developmentally appropriate; continuous effort; evaluation & accountability; generalization²
- 24/7 on-call staff to provide clinical services for families^{1,2}

→ iowacebh.org

Fidelity & Standards

Fidelity

- Yes
 - Therapist Adherence Measure-Revised (TAM-R)³

Core Standards

- Youth/adolescents:
 - I: Eliminate or significantly reduce the frequency and severity of problem behavior(s)¹
 - II: Learn skills on how to better cope with family, peer, school, and neighborhood problems¹
- Parents/caregivers:
 - III: Learn skills to independently address the inevitable difficulties that arise in raising children and adolescents¹
 - IV: Learn skills to help youth to cope with family, peer, school, and neighborhood problems¹

Data & Other States

Implementation

- 34 states⁴
 - Iowa providers: Vera French, Mid-Plains Center for Behavioral Healthcare Services

WA Institute for Public Policy⁵

- Evidence showing effectiveness across racial/ethnic identities
- Benefit-cost ratio (per participant):

Total benefits	\$13,519
Net program cost	\$8,577
Benefits minus cost	+ \$4,942

References

- <https://www.cebc4cw.org/program/multisystemic-therapy/detailed>
- <https://evidencebasedassociates.com/wp-content/uploads/2017/09/MST-Overview-long-2017.pdf>
- <https://msti.org/tam>
- <https://www.countyhealthrankings.org/>
- https://www.wsipp.wa.gov/ReportFile/1727/WSIPP-Updated-Inventory-of-Evidence-Based-Research-Based-and-Promising-Practices-For-Prevention-and-Intervention-Services-for-Children-and-Juveniles-in-the-Child-Welfare-Juvenile-Justice-and-Mental-Health-Systems_Report.pdf

Produced by Center of Excellence for Behavioral Health at University of Iowa Hospitals and Clinics Center for Disabilities and Development. The Center of Excellence for Behavioral Health is funded by the Iowa Department of Health and Human Services

CEBH EBP Summit

Keynote: How Evidence-based Practices Contribute to Community Integration & Culturally Informing Evidence-based Practices to Meet the Needs of Our Community

1. ACT
 1. Where it all began: An overview of ACT and where Iowa is today
 2. Supporting ACT in Rural Settings
 3. Case Studies: Integration of ACT and PSH
2. IPS
 1. Supporting IPS in Rural Settings
 2. Case Studies: Integration with Mental Health Service Providers
 3. IPS 101: What, Why, and Where
3. PSH
 1. Aligning PSH in Iowa
 2. Implementation Examples: Models of PSH
 3. We Want To Hear From You: Where Does PSH Need To Go?

Iowa's Center of Excellence for Behavioral Health
INVITES YOU

Evidence-based Practices in Behavioral Health Summit

Learn. Support. Advance.

Taking a deeper dive into how we can adopt, adapt, and expand EBPs in Iowa

Friday, September 29, 2023

9:00 am to 4:00 pm CT

Hilton Garden Inn Des Moines/Urbandale

8600 Northpark Drive, Johnston, IA



<https://EBPSummit.rsvpify.com>

Cost: Free

4.5 CEU/CEH

IBC approval currently in process

Questions? Contact:

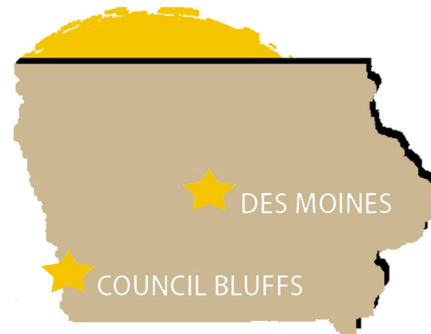
iowa-cebh@uiowa.edu



The Center of Excellence for Behavioral Health is sponsored by the Iowa Department of Health and Human Services

ANAWIM HOUSING

*Anawim's mission is to develop stable homes
and strengthen people and communities*





GROUND BREAKING

AT THE FUTURE SITE OF THE MONARCH APARTMENTS

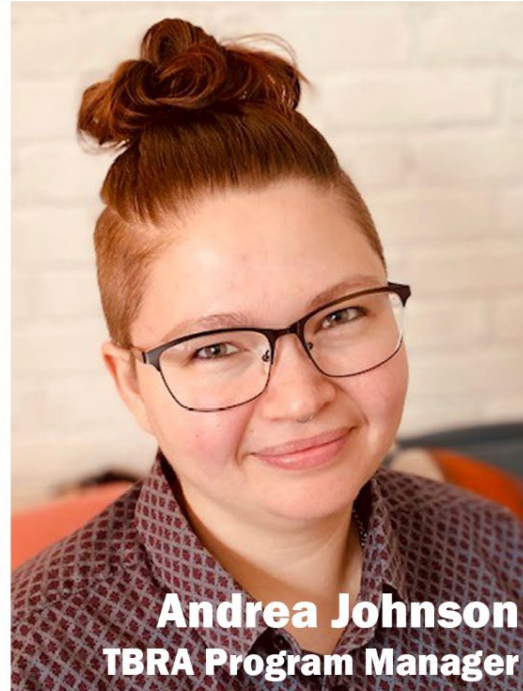


Sept. 19TH Join us!

Anawim in Council Bluffs:



Brandi Luther
Program Manager



Andrea Johnson
TBRA Program Manager



Key Concepts for Creative Projects:

- ❖ Commit to Housing First
- ❖ Utilize Evidence based practices including person centered case management, harm reduction and motivational interviewing
- ❖ Learn the “rules” inside and out
- ❖ Define the need
- ❖ Develop a clear goal Who? What? How?
- ❖ Utilize the established triage system. Centralized Intake or Coordinated Entry
- ❖ Utilize HUD and SAMSHA “best practices”
- ❖ Leverage the opportunities for flexibility

Key Concepts for Creative Projects:

- ❖ Engage with community resources and partners
- ❖ Track your outcomes- data is key
- ❖ Consider the unintended consequences for your project
- ❖ Remain flexible- when possible
- ❖ Hire people that embody the values of the project- and support them.
- ❖ Engage in continuous improvement
- ❖ Celebrate success and learn from the struggles

Connect with us:



/anawimhousing



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Cynthia Latcham, MPA

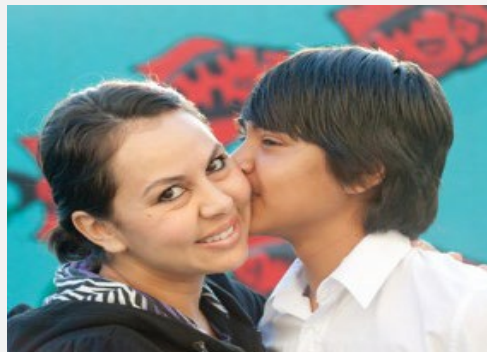
President

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www.Anawimhousing.org

IMPROVING LIVES



CSH is a touchstone for new ideas and best practices, a collaborative and pragmatic community partner, and an influential advocate for supportive housing



**TRAINING AND
EDUCATION**



LENDING



POLICY REFORM



**CONSULTING &
TECHNICAL
ASSISTANCE**

There are approximately
9,211 households in Iowa
in need of supportive
housing today



Greatest Need by Group:
Aging - 45%
IDD - 20%
Justice - 15%

Based on [CSH National Supportive Housing Needs Assessment](#)

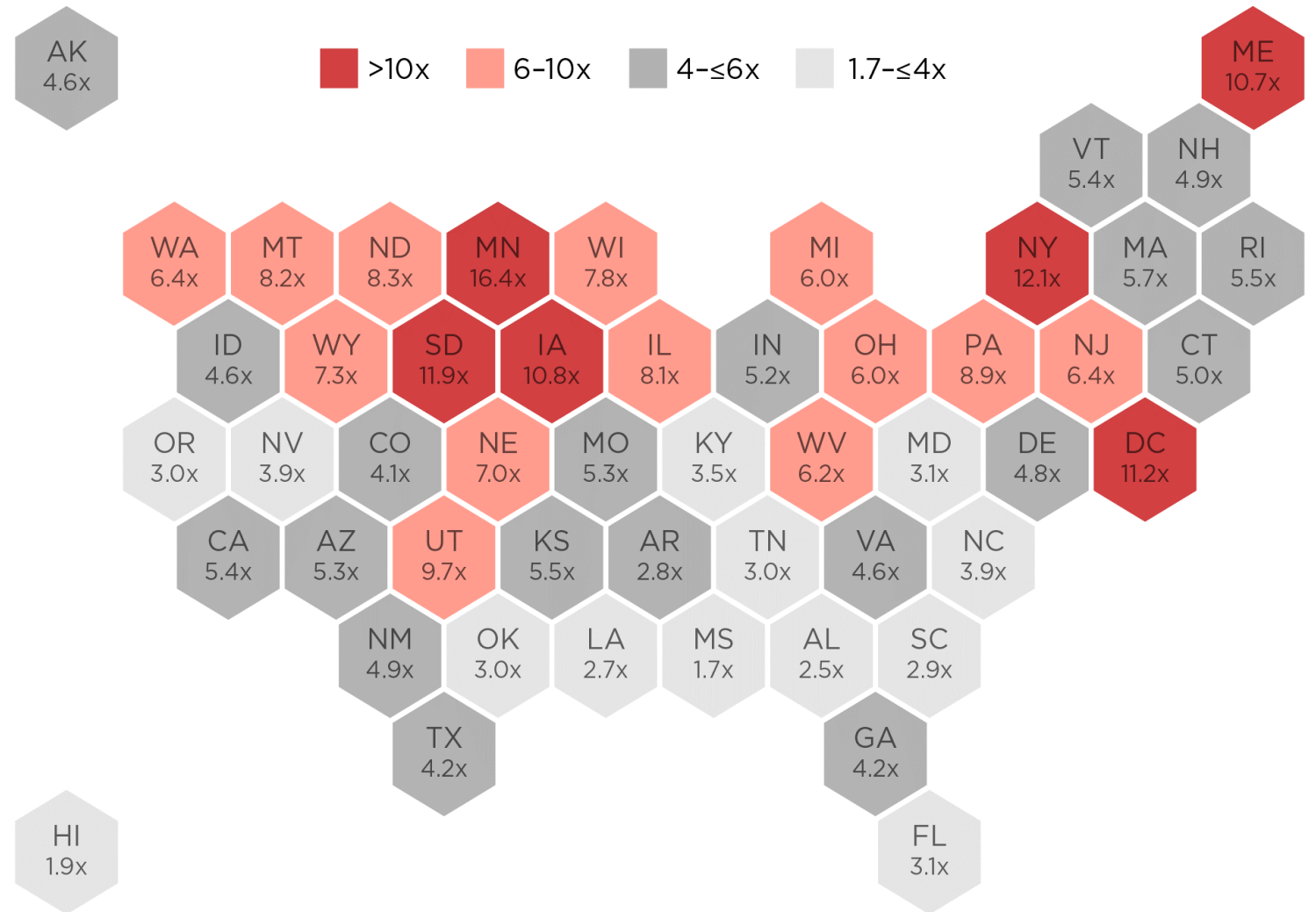
NATIONAL DATA - HOMELESSNESS

US Pop/Homeless
1.35 --> 3% Native
13% --> 40% Black
16.7% --> 22% Latinx
76% --> 49% White

Source: National Alliance to End Homelessness

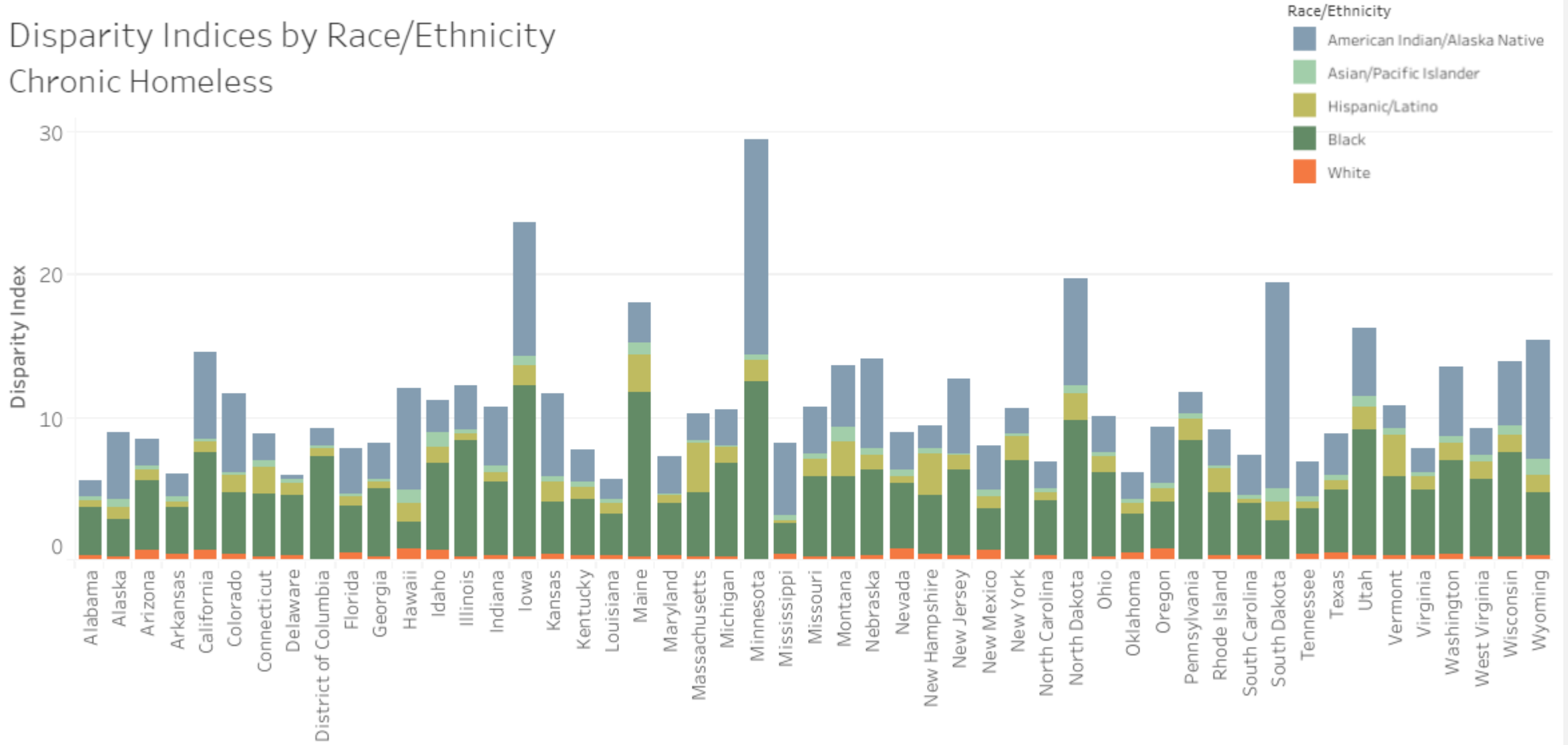
In Every State, African Americans Are More Likely Than Whites to Experience Homelessness

Ratio of Black-to-White homelessness rate by state, 2018



Disparity Indices by Race/Ethnicity

Chronic Homeless

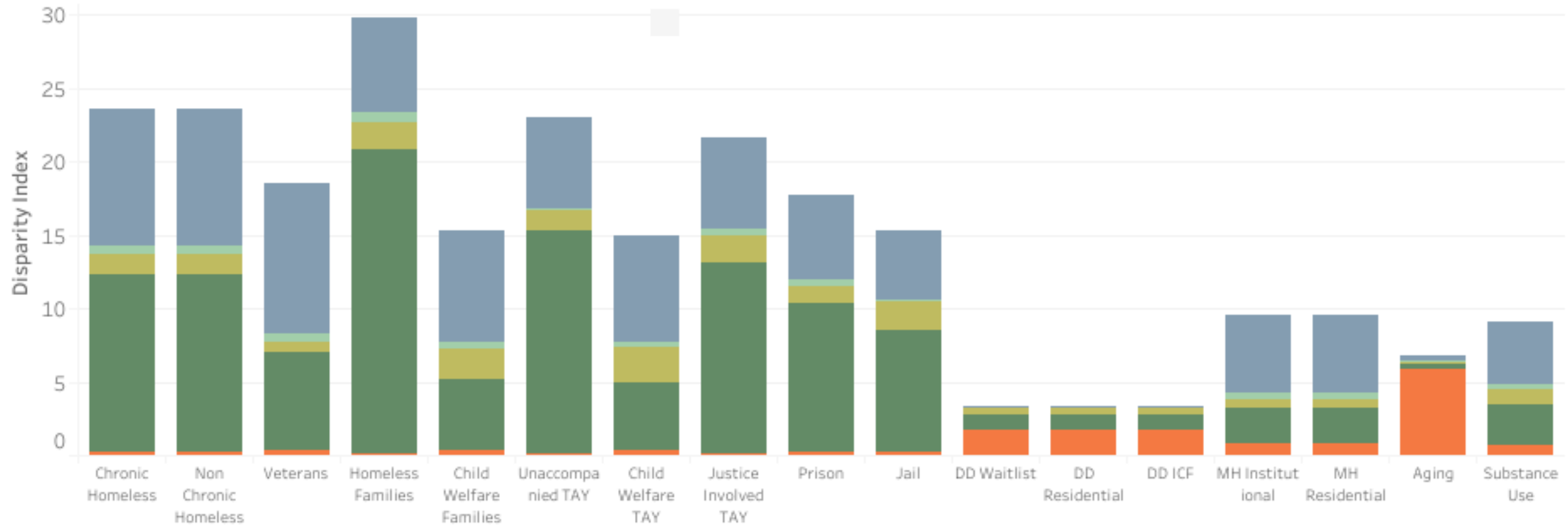


- Race/Ethnicity
- American Indian/Alaska Native
 - Asian/Pacific Islander
 - Hispanic/Latino
 - Black
 - White

Race/Ethnicity

System

Disparity Indices in Iowa





Denver Social Impact Bond Initiative

- Five-year social impact bond initiative launched in 2016 by the City and County of Denver
- Goal: Increase housing stability and decrease jail stays among people who were experiencing chronic homelessness and who had frequent interactions with the criminal justice and emergency health systems.
- Provided supportive housing using a housing first approach
- Used a randomized controlled trial, the gold standard for determining a program's impact, that included 724 people
 - 363 people were in the treatment group (referred to the supportive housing program)
 - 361 people were in the control group (receiving services as usual in the community).



After three years in the supportive housing program, **77 percent** of participants remained in **stable housing**.

- <https://www.urban.org/features/housing-first-breaks-homelessness-jail-cycle>
- <https://pfs.urban.org/pfs-project-fact-sheets/content/denver-social-impact-bond-program>

Supportive housing helped people avoid police contacts, arrests, and jail days

- 34 percent reduction in police contacts
- 40 percent reduction in arrests
- 30 percent reduction in unique jail stays and a 27 percent reduction in total jail days.

Supportive housing helped people use less emergency health care and more office-based health care

- 40 percent decrease in emergency department visits
- 155 percent increase in office-based visits with a psychiatric diagnosis
- 29 percent increase in unique prescription medications

Supportive housing reduced the public costs of the homelessness-jail cycle

- Denver SIB participants had \$6,876 less in total annual, per person costs associated with other emergency public services compared with the control group
- The biggest avoidances were in reduced jail, ambulance, and emergency department costs.

About half of the total per person cost of the Denver SIB was **offset** by avoided costs for other public services, such as jails and emergency departments.



About

The Supportive Housing Alliance, formerly known as the Stewardship Council, is an interagency working group whose purpose is to directly impact the creation, preservation, and stabilization of supportive housing as a key component in Minnesota's work to prevent and end homelessness. The Supportive Housing Alliance is committed to increasing equitable access and increasing the development of supportive housing. The Supportive Housing Alliance's scope includes supportive housing that is scattered-site or site-based, targeted to those experiencing homelessness and persons with disabilities.

Member organizations include:

[Minnesota Housing Finance Agency \(MHFA\)](#)

[Department of Human Services \(DHS\)](#)

[Corporation for Supportive Housing \(CSH\)](#)

[Greater Minnesota Housing Fund \(GMHF\)](#)

Ramsey County

Hennepin County

St. Louis County

Dakota County

City of St. Paul

City of Minneapolis

City of Duluth

Supportive Housing Alliance Leadership:

Chair – Amy Stetzel, CSH

Supportive Housing Standards

Standards at Application

Standards during Tenancy/Operations

Standards During Housing Transition

Guiding Principles

Principles that should govern the provision of supportive housing



Entity Qualifications

Training and Staffing Expectations for Site Staff

Property Management, Service Provider and Front Desk staff align with core values of supportive housing and reflect the population being served.

Use Housing First, harm reduction, and person-centered approaches

Ensure that interactions with tenants are trauma-informed

Are provided with ongoing supervision and support



A statewide coalition of more than
240 ENDORSING ORGANIZATIONS

NORTHWEST

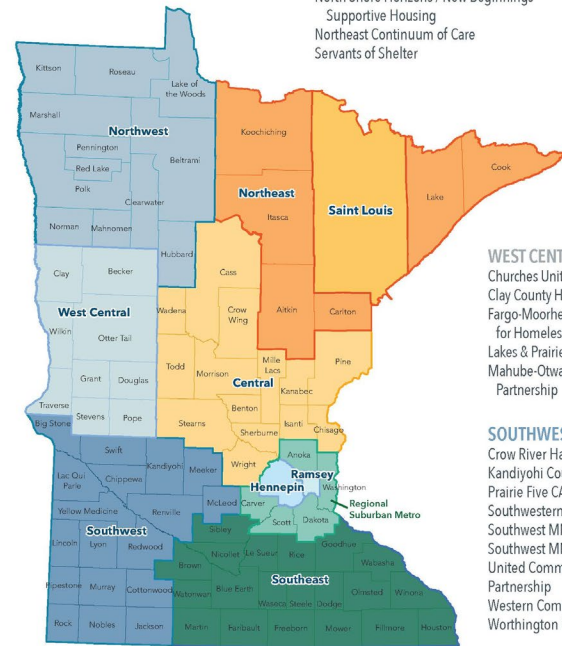
Baudette HRA
Care and Share of Crookston, Inc.
Evergreen Youth & Family Services
Inter-County Community Council
Northwest Minnesota Foundation
Northwest MN Continuum of Care
Occupational Development Center, Inc.
Ours to Serve House of Hospitality Village of Hope
White Earth Homeless Program
Tri-Valley Opportunity Council

NORTHEAST

Northland Counseling Center
Aitkin County Habitat of Humanity
Aitkin County Homeless Coalition
Arrowhead Economic Opportunity Agency, Inc.
Beacons Of Hope
Cloquet Housing & Redevelopment Authority
Grace House of Itasca County
HRA of Aitkin County
HRA of Two Harbors, MN
International Falls HRA
Itasca County HRA
KOOTASCA Community Action, Inc.
North Shore Horizons / New Beginnings
Supportive Housing
Northeast Continuum of Care
Servants of Shelter

SAINT LOUIS

American Indian Community Housing Org
Bois Forte Tribal Government
CHUM
City of Duluth
Community Action Duluth
Duluth HRA
Duluth LISC
Eveleth HRA
Hibbing HRA
HRA of Ely
HRA of Gilbert
Life House, Inc.
Loaves & Fishes
North St. Louis County Habitat for Humanity
One Roof Community Housing
Range Mental Health Center
Range Transitional Housing, Inc.
Rural Housing Coalition
SLC Heading Home
United Way of Northeastern Minnesota
Virginia HRA
Western Lake Superior Habitat for Humanity
YWCA Duluth



WEST CENTRAL

Churches United for the Homeless
Clay County HRA
Fargo-Moorhead Coalition
for Homeless Persons
Lakes & Prairies Community Action
Mahabe-Otwa Community Action
Partnership

CENTRAL

A Place For You
Catholic Charities of the
Diocese of St. Cloud
Central Continuum of Care
Central Minnesota Housing
Partnership
City of Princeton
D.W. Jones, Inc.
East Central Housing Organization
Lakes and Pines Community
Action Council
Leech Lake Homeless Shelter
Mora HRA
Open Doors for Youth
Perspectives, Inc
Rise Inc
Sand Companies, Inc.
STEP
Tri-CAP

SOUTHWEST

Crow River Habitat for Humanity
Kandiyohi County HRA
Prairie Five CAC, Inc.
Southwestern Mental Health Center
Southwest MN Continuum of Care
Southwest MN Housing Partnership
United Community Action
Partnership
Western Community Action, Inc.
Worthington HRA

Learn more at www.homesforallmn.org

NORTH
Dakota
Be Legendary.™

Behavioral Health
HUMAN SERVICES

Permanent Supportive Housing



Permanent Supportive Housing



During the 2021 legislative session, the Department of Human Services' Behavioral Health Division was directed to develop a funding methodology to distribute funding to qualified entities that

- utilize best practices for permanent supportive housing,
- provide recovery-oriented and person-centered services,
- submit process and outcome measures to the department, and
- authorize the department to conduct onsite visits to review program operations.

The image features a row of four wooden house figurines of varying heights and shapes, placed on a wooden surface. The background is a soft, out-of-focus green landscape. A semi-transparent green box is overlaid on the right side of the image, containing white text.

Current State Contracts

1. Prairie Harvest Mental Health

Stern Place: 9 units

Harvest Homes: 12 units

2. Grand Forks Housing Authority

LaGrave on First: 42 Units

3. Fargo Housing Authority

Cooper House: 42 Units

4. Burleigh County Housing Authority

Edwinton: 40 units



What do these contracts require?

- Utilize Coordinated Entry for referrals, (CARES)
- Outreach and Engagement
- Connection to Services
- Incorporation of Braided Funding
- Utilize Homeless Management Information System for data collection

Values



Person Centered



Trauma Informed



Data Driven



Best Practice



Recovery Oriented



Integrated



Transparency



Accountability

What are the pillars of supportive services?



Community based, the tenant participates in the life of the community



Assist tenants in navigating issues and choices related to their ability to remain housed



Tenants have choices and the supportive services are voluntary, the tenant cannot be evicted for rejecting services



Independent living skills, this type of support is crucial to help tenants with limited skills learn to meet their tenancy obligations

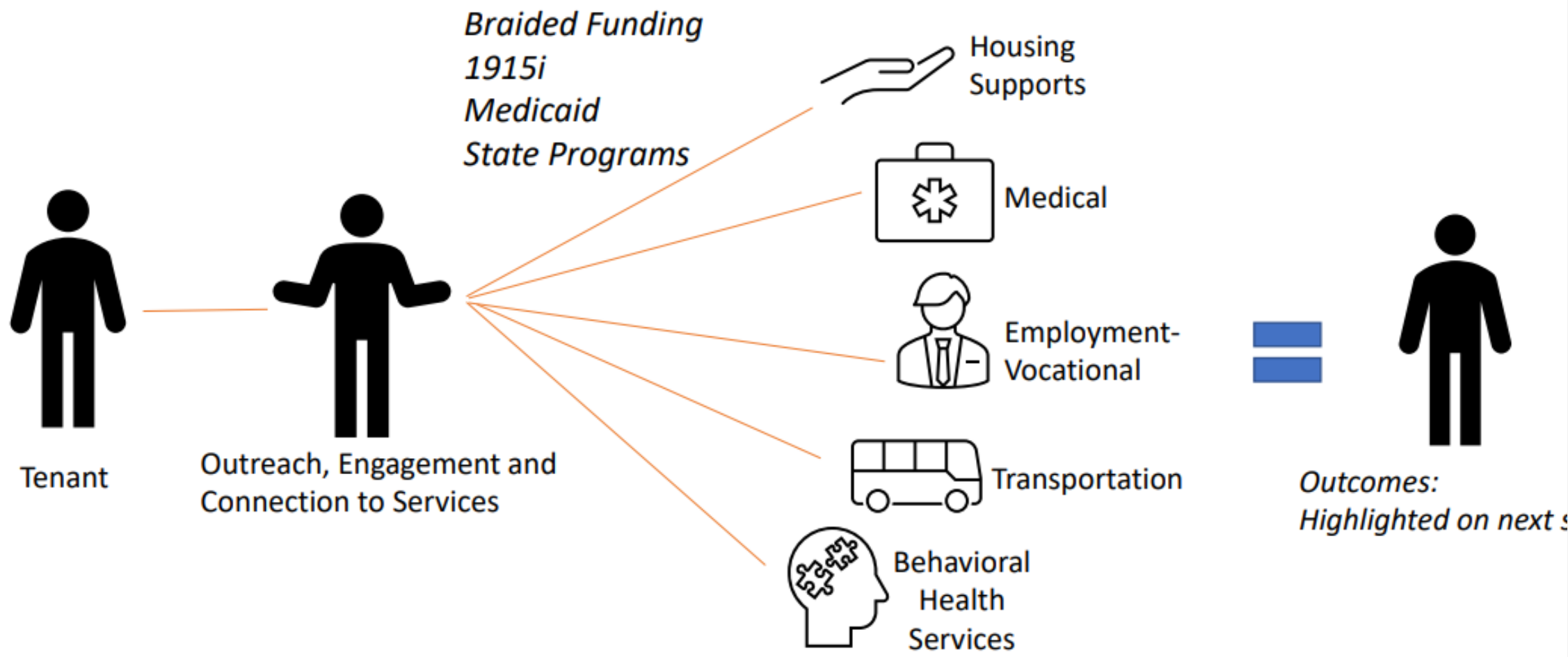


Behavioral health services, which includes mental health and substance abuse





Tenant Experience



Process and Outcome Measures

Process Measures

- Utilization of Coordinated Entry
- Low Barrier admissions policies
- Outreach and Engagement
- Assessments
- Service Plans
- Community Engagement
- Training

Outcome Measures

- 60% of tenant's secure new benefits, maintain stable income, and/or increase income
- 60% of tenants participate in tenancy support services
- 85% of tenants do not move to sheltered or unsheltered homelessness
- Length of stay at Permanent Supportive Housing

Fargo Housing Authority

Recently procured a new on-site service provider

- Community Options
 - Completed group and individual provider enrollment for 1915i, enrolled to provide:
 - Care Coordination
 - Housing Supports
 - Non-medical transportation
 - Benefits Planning
 - Community Connect and Free Through Recovery Provider



Cooper House-42 Units

Grand Forks Housing Authority

- Completed group provider enrollment for 1915i, enrolled to provide:
 - Non-medical transportation
 - Care Coordination
 - Peer Support
 - Benefits Planning
 - Housing Supports
- Received provider incentive grant to assist with financial piece of enrollment



LaGrave on First-42 Units

Prairie Harvest Mental Health

- Completed group and individual provider enrollment for 1915i, enrolled to provide:
 - Non-medical transportation
 - Care Coordination
 - Benefits Planning
- Completed group and individual provider enrollment for Medicaid
 - Targeted Case Management
 - Psycho-Social Rehabilitative Services
- Received provider incentive grant to assist with financial piece of enrollment



Stern Place-9 units



Harvest Homes-12 units

Burleigh County Housing Authority

- Onsite service provider is Dacotah Foundation
- Dacotah Foundation has completed group and individual provider enrolment for 1915i, enrolled to provide:
 - Housing Supports
- Received provider incentive grant to assist with financial piece of enrollment



Edwinton-40 units

Contact

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 - www.anawimhousing.org
- Amy Stetzel
 - Upper Midwest Director, Corporation for Supportive Housing
 - amy.stetzel@csh.org
 - www.csh.org



Register for
CEBH's EBP
Summit

Resources

Accessing Services

- Iowa Coordinated Entry
 - iowace@icalliances.org
- Iowa Housing Help
 - www.iowahousinghelp.org
- MHDS Regions
 - www.iowamhdsregions.org

Expanding/Building/Funding

- IA Continuum's of Care
 - iaboscoc.org;
 - (Polk) homewardiowa.org;
 - (Woodbury) siouxlandhomeless.org
- Iowa Finance Authority
 - www.iowafinance.com

Training/More Info

- Corporation for Supportive Housing
 - www.cshtrainingcenter.org
- Iowa CEHB
 - iowa-cebh@uiowa.edu